

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

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GOVERNOR'S OFFICE  
LEGAL AFFAIRS

APR - 1 2008  
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Please type or print in ink.

NAME (LAST) <b>RUSSELL</b>	(FIRST) <b>CLAY</b>	(MIDDLE) <b>RICHARD</b>	DAYTIME TELEPHONE NUMBER <b>[REDACTED]</b>
MAILING ADDRESS (May use business address) <b>OFFICE OF THE GOVERNOR STATE CAPITOL</b>		CITY <b>SACRAMENTO</b>	STATE ZIP CODE <b>CA 95814</b>
OPTIONAL: FAX / E-MAIL ADDRESS			

**1. Office, Agency, or Court**  
Name of Office, Agency, or Court:  
**OFFICE OF THE GOVERNOR**  
Division, Board, District, if applicable:  
  
Your Position:  
**SPECIAL ASSISTANT TO THE GOVERNOR**  
→ If filing for multiple positions, list additional agency(ies)/ position(s). (Attach a separate sheet if necessary.)  
Agency: \_\_\_\_\_  
Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**  
☒ State  
☐ County of \_\_\_\_\_  
☐ City of \_\_\_\_\_  
☐ Multi-County \_\_\_\_\_  
☐ Other \_\_\_\_\_

**3. Type of Statement (Check at least one box)**  
☐ Assuming Office/Initial Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
☒ Annual: The period covered is January 1, 2007, through December 31, 2007.  
-or-  
☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_ through December 31, 2007.  
☐ Leaving Office Date Left: \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)  
☐ The period covered is January 1, 2007, through the date of leaving office.  
-or-  
☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_ through the date of leaving office.  
☐ Candidate

**4. Schedule Summary**  
→ Total number of pages including this cover page: **4**  
→ Check applicable schedules or "No reportable interests."  
I have disclosed interests on one or more of the attached schedules:  
Schedule A-1 ☐ Yes - schedule attached  
Investments (less than 10% ownership)  
Schedule A-2 ☐ Yes - schedule attached  
Investments (10% or greater ownership)  
Schedule B ☐ Yes - schedule attached  
Real Property  
Schedule C ☒ Yes - schedule attached  
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)  
Schedule D ☒ Yes - schedule attached  
Income - Gifts  
Schedule E ☐ Yes - schedule attached  
Income - Travel Payments  
-or-  
☐ No reportable interests on any schedule

**5. Verification**  
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.  
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.  
Date-Sig: **04-01-08**  
Signature: **[REDACTED]**

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <u>RUSSELL, CLAY R</u>

**> 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
STATE OF CALIFORNIA

ADDRESS  
OFFICE OF THE GOVERNOR  
SACRAMENTO CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

YOUR BUSINESS POSITION  
ASSISTANT TO THE GOVERNOR

GROSS INCOME RECEIVED  
☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
☒ Salary      ☐ Spouse's or registered domestic partner's income  
☐ Loan repayment  
☐ Sale of \_\_\_\_\_  
(Property, car, boat, etc.)  
☐ Commission or ☐ Rental Income, list each source of \$10,000 or more  
\_\_\_\_\_  
☐ Other \_\_\_\_\_  
(Describe)

**> 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
HERITAGE WINE CO.

ADDRESS  
155 N. RAYMOND  
PASADENA CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
RETAIL WINE SALES

YOUR BUSINESS POSITION  
DIRECTOR OF WINE

GROSS INCOME RECEIVED  
☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
☐ Salary      ☒ Spouse's or registered domestic partner's income  
☐ Loan repayment  
☐ Sale of \_\_\_\_\_  
(Property, car, boat, etc.)  
☐ Commission or ☐ Rental Income, list each source of \$10,000 or more  
\_\_\_\_\_  
☐ Other \_\_\_\_\_  
(Describe)

**> 2. LOAN RECEIVED**

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER  
\_\_\_\_\_  
ADDRESS  
\_\_\_\_\_  
BUSINESS ACTIVITY, IF ANY, OF LENDER  
\_\_\_\_\_

INTEREST RATE  
\_\_\_\_\_ %      ☐ None

TERM (Months/Years)  
\_\_\_\_\_

SECURITY FOR LOAN  
☐ None      ☐ Personal residence

☒ Real Property \_\_\_\_\_  
Street address  
\_\_\_\_\_  
City

☐ Guarantor \_\_\_\_\_

☐ Other \_\_\_\_\_  
(Describe)

**HIGHEST BALANCE DURING REPORTING PERIOD**

☐ \$500 - \$1,000  
☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000  
☐ OVER \$100,000

Comments:

SEE ADDITIONAL PAGE

047 021 111

Addendum to Schedule C for Clay Russell *CR*

Source: International Quality & Productivity Center  
5 Bligh Street  
Sydney NSW 2000  
Australia

Business activity: Conference organizers

Dates: 7/29/07 - 8/4/07

Amount: \$2800

Type of payment: Income

Description: Transportation and lodging to speak at a conference of Executive and Personal Assistants (gave keynote address & facilitated two seminars/workshops)

**SCHEDULE D**  
**Income - Gifts**

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

RUSSELL, CLAY R

> NAME OF SOURCE

CARUSO AFFILIATED  
ADDRESS 101 THE GROVE DR.  
LOS ANGELES, CA 90036  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02/01/07	175	"THE GROVE" PARKING PASS
	\$	
	\$	

> NAME OF SOURCE

ADDRESS  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	
	\$	
	\$	

> NAME OF SOURCE

ADDRESS  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	
	\$	
	\$	

> NAME OF SOURCE

ROBERT EMAMI  
ADDRESS 1650 LAFAYETTE ST.  
SANTA CLARA, CA 95050  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10/13/07	200	2 BTL. WINE
10/23/07	100	1 BTL. WINE
	\$	

> NAME OF SOURCE

ADDRESS  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	
	\$	
	\$	

> NAME OF SOURCE

ADDRESS  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	
	\$	
	\$	

Comments:

# SCHEDULE D Income - Gifts

CALIFORNIA FORM	700
FAIR POLITICAL PRACTICES COMMISSION	
AMENDMENT	

NAME OF SOURCE

Caruso Affiliated

ADDRESS

101 The Grove Drive Los Angeles CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2 / 1 / 07	\$ 175	Grove parking pass (1)
	\$	
	\$	

NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	
	\$	
	\$	

NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	
	\$	
	\$	

NAME OF SOURCE

Robert Emami

ADDRESS

1650 Lafayette Street, Santa Clara, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 13 / 07	\$ 200	2 btls wine
10 / 23 / 07	\$ 100	1 btl wine
	\$	(2)

NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	
	\$	
	\$	

## Verification

Print Name Clay Russell

Office, Agency or Court Office of the Governor

Statement Type ☒ 2007/2008 Annual ☐ Assuming ☐ Leaving  
☐ (or) Annual ☐ Candidate

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed March 10, 2009

Signature

Comments: (1) Reimbursed full amount 3/10/09; (2) Reimbursed full amount 3/10/09